



**STATE OF MAINE
DEPARTMENT OF PROFESSIONAL
AND FINANCIAL REGULATION
OFFICE OF LICENSING AND REGISTRATION
CHARITABLE SOLICITATIONS APPLICATION**

APPLICANT INFORMATION (please print)

FULL LEGAL NAME

FEIN OR SSN

PHYSICAL ADDRESS

CITY STATE ZIP COUNTY

MAILING ADDRESS

CITY STATE ZIP COUNTY

PHONE # () FAX # () E-MAIL

By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief. By submitting this application, I affirm that the Office of Licensing and Registration will rely upon this information for issuance of my license and that this information is truthful and factual. I also understand that sanctions may be imposed including denial, fines, suspension or revocation of my license if this information is found to be false.

SIGNATURE

DATE

CHARITABLE SOLICITATIONS PROGRAM

Exempt Charitable Organization Application

Required Fee: \$10.00

Also: \$10.00 if renewal

☐ EXEMPT CHARITABLE ORGANIZATION (ECO1421)

Office Use Only:

1421 - \$10.00
1427 - \$10.00
2090 - \$50.00

Office Use Only:

Check # _____
Amount: _____
Cash # _____
Lic. # _____
Issue Date _____
Exp. Date _____

PAYMENT OPTIONS:

Make checks payable to "Maine State Treasurer" - If you wish to pay by Mastercard or Visa, fill out the following:

NAME OF CARDHOLDER (please print) FIRST MIDDLE INITIAL LAST

I authorize the Department of Professional and Financial Regulation, Office of Licensing and Registration to charge my

☐ VISA ☐ MASTERCARD the following amount: \$ _____

Card number: XXXX-XXXX-XXXX-XXXX Expiration Date mm / yyyy

SIGNATURE

DATE

Frequently Asked Questions

- **Where do I send my application?** Our mailing address is 35 State House Station, Augusta, Maine 04333-0035
- **Where are you located?** 122 Northern Avenue, Gardiner, Maine.
- **What hours are you open?** 8:00 AM to 5:00 PM weekdays
- **Can I come to Gardiner to drop off my application?** Yes. You will not leave with a license, though.
- **Can I come to Gardiner to pick up my license?** No. Your license will be mailed to you.
- **How long does it take to process an application?** You can check our website: www.maine.gov/professionallicensing. Your license will show up as PENDING at first; as soon as your status is ACTIVE you are authorized to practice.

What if I have other questions? Visit our website at: http://www.maine.gov/pfr/professionallicensing/professions/charitable/exempt_organization.htm or contact Marlene McFadden, Office Specialist I, Tel. 207/624-8624, e-mail: Marlene.McFadden@Maine.gov or Elaine Thibodeau, Program Administrator, Tel 207/624-8617, e-mail: Elaine.M.Thibodeau@Maine.gov

NOTICE

PUBLIC RECORD: This application is a public record for purposes of the Maine Freedom of Access Law (1 MRSA §401 et seq). Public records must be made available to any person upon request. This application for licensure is a public record and information supplied as part of the application (other than social security number and credit card information) is public information. Other licensing records to which this information may later be transferred will also be considered public records. Names, license numbers and mailing addresses listed on or submitted as part of this application will be available to the public and may be posted on our website.

Before you seal the envelope, did you:

- Complete every item on the application (incomplete applications may be returned)
- Sign and date your application
- Include correct amount (payable to Maine State Treasurer) or credit card information (plus signature)
- Make a copy of your application to keep for your records
- DO NOT SEND CASH.

INSTRUCTIONS FOR EXEMPTION

Exempt Charitable Organizations are required to file an Affidavit for Exemption (this application) annually, on or before the November 30th renewal date.

If your organization qualifies for any of the “exemptions” listed below, then please complete the attached affidavit and submit the required documentation. If it does not, then please complete a Charitable Organization license application, which is available at this website:

<http://www.maine.gov/pfr/professionallicensing/professions/charitable/>

If you have any questions, please contact this office.

The following organizations are eligible to apply as Exempt Organizations:

- Organizations that solicit primarily within their membership, with solicitation activities being conducted by the members.
- Persons soliciting contributions for the relief of any individuals specified by name at the time of the solicitation, when all of the contributions collected, without any deductions whatsoever, are turned over to the named beneficiary for that individual's use.
- Organizations that do not intend to solicit and receive, and do not actually solicit or receive, contributions from the public in excess of \$10,000 during a calendar year, or do not receive contributions from more than 10 persons during a calendar year, if all fund-raising activities are conducted by persons who are unpaid for their services, and if no part of the assets or income inures to the benefit of, or is paid to, any officer or member.
- Educational institutions, the curriculums of which in whole or in part are registered or approved by the Department of Education, either directly or by acceptance of accreditation by an accrediting body recognized by the Department of Education, and organizations operated by the student bodies of such institutions.
- Hospitals that are nonprofit and charitable.

Charitable exempt organization status exempts the organization from licensure as a Charitable Organization in the State of Maine. (An organization established for, and serving, a *bona fide* religious purpose is not subject to the licensure requirement.)

All charitable licenses expire on 11/30 of every year.

WHAT TO SUBMIT FOR CHARITABLE EXEMPTION LICENSURE

This Application for Licensure as an Exempt Charitable Organization (“Affidavit for Exemption”).

- Statement of organizational purpose (which may be either stated in the Affidavit or referenced as an attached document).
- Notary’s signature and seal.
- \$10 fee. Please do not send cash.
- A photocopy of your organization’s IRS Determination Letter (for the initial application), according it tax-exempt status under Section 501(c) 3 or some other provision of the Internal Revenue Service Code (if you have one).
- Financial Information: A copy of your organization's most recent audited financial statement and most-recent IRS Form 990 or Form 990 EZ. (Please submit both, if available. If you have only one, then submit it. If you have neither, then submit a photocopy of the organization’s budget.)
- A current list of officers, directors or trustees. The list must include the principal salaried executive officer of your organization with his/her current address.

EXEMPT CHARITABLE ORGANIZATION

AFFIDAVIT FOR EXEMPTION

(from the requirement to become licensed as a Charitable Organization)

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Personally appeared before me, the undersigned authority _____
(Person Making Statement)

who is _____
(Owner/President/Vice President/Secretary/Treasurer/Partner)

of _____
(Name of Organization)

located at _____
(Street Address) P. O. Box (if applicable)

in _____
(City, State and Zip Code) () -
(Telephone Number)

E-mail: _____ @ _____

Federal Employer's Identification Number (FEIN): _____

Describe the purpose of the Exempt Charitable Organization:

The fiscal year for the organization is from: ____/____/____ to ____/____/____.

Please attach a list of directors and officers, including the organization's principal officer. This list should include mailing addresses, contact phone numbers, and e-mail addresses.

Please check the category of exemption for which your organization is applying:

- ☐ Organizations that solicit primarily from within their membership and in which solicitation activities are conducted by the members.
- ☐ Persons soliciting contributions for the relief of any individuals specified by name at the time of the solicitation, when all of the contributions collected, without any deductions whatsoever, are turned over to the named beneficiary for that individual's use.
- ☐ Organizations that do not intend to solicit and receive and do not actually solicit or receive contributions from the public in excess of \$10,000 during a calendar year or do not receive contributions from more than ten persons during a calendar year, if all fund-raising activities are carried on by persons who are unpaid for their services and if no part of the assets or income inures to the benefit of or is paid to any officer or member.
- ☐ Educational institutions, the curriculums of which in whole or in part are registered or approved by the Department of Education, either directly or by acceptance of accreditation by an accrediting body recognized by the Department of Education, and organizations operated by the student bodies of such institutions.
- ☐ Hospitals that are nonprofit and charitable.

I understand that anyone knowingly making a false representation with the intent to obtain an exemption from the requirements of Title 9, Chapter 385 commits a Class D crime.

If these facts or circumstances change so as to alter the basis for exemption, I shall immediately notify the Department of Professional and Financial Regulation, Office of Licensing and Registration, of the changes.

Signature

Date

Name Typed or Printed _____

Sworn and subscribed to before me this _____ day of _____ 20____

Notary's Signature	Jurisdiction in which Signed
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Notary's Name Typed or Printed